

PTO/SAR-1 (10-01)
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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)))

Attorney Docket Number	
First Named Inventor	SANSCHAGRIN, Stéphane
COMPLETE IF KNOWN	
Application Number	/
Filing Date	
Art Unit	
Examiner Name	

As a below-named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Airborne Engine Cowling

the specification of which

(Title of the Invention)

is attached hereto

as United States Application Number or PCT International

OR

was filed on (MM/DD/YYYY) []

(if applicable)

Application Number []

and was amended on (MM/DD/YYYY) []

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(b)-(d) or (i), or 365(b) or any foreign application(s) for patent, inventors or plant breeders rights certificate(s), or 365 (e) or any PCT international application which designated at least one country other than the United States of America, listed below and may also identify below, by checking the box, any foreign application for patent, inventors or plant breeders rights certificate(s), or any PCT international application having a filing date before that of this application on which priority is claimed.

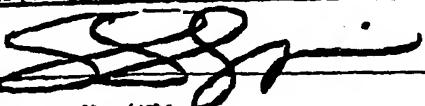
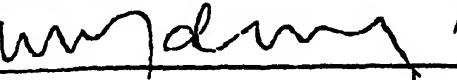
Prior Foreign Application	Foreign Filing Date	Priority	Certified Copy Attached?
		YES	NO
[]	[]	<input type="checkbox"/>	<input type="checkbox"/>
[]	[]	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SAR-02R attached herein.

[PAGE 1 OF 2]

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Country _____	Telephone _____		Fax _____	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>				
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Stephen		Family Name or Surname SANSCHACKIN		
Inventor's Signature 				Date 10. 4. 03
Residence: City St-Hyacinthe	State QC	Country Canada		Citizenship Canadian
Mailing Address 1850 St-Antoine Street, Apt. 254				
City St-Hyacinthe	State Canada	ZIP J2S 3L7	Country Canada	
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Nicolas		Family Name or Surname DREVILLE		
Inventor's Signature 				Date 10/04/03
Residence: City Montreal	State QC	Country Canada		Citizenship French
Mailing Address 1369 Mont-Royal East				
City Montreal	State QC	ZIP H2J 1Y6	Country Canada	
<input checked="" type="checkbox"/> Additional inventors are being named on <u>1</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.				

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NAME OF SOLE OR FIRST INVENTOR :

A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) *Pierre*

Family Name
or Surname VIGNAU

Inventor's
Signature *Pierre Vignau*

APR -10 -03

Date

Residence: City Montreal

State QC

Country Canada

Citizenship Canadian

Mailing Address 6311, 26th Avenue

City Montreal

State QC

ZIP H1T 3K7

Country Canada

NAME OF SECOND INVENTOR:

A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any])

Family Name
or Surname

Inventor's
Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

City

State

ZIP

Country

Additional inventors are being named on _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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PTO/SB/81 (02-01)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	SANSCHAGRIN, Stéphane
Group Art Unit	
Examiner Name	
Attorney Docket Number	

I hereby appoint:

Practitioner(s) at Customer Number OR
 Practitioner(s) named below:

Name	Registration Number



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I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	SANSCHAGRIN, Stéphane
Signature	
Date	10.4.03

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one person is signing.

Total of 03 forms are submitted.

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	SANSCHAGRIN, Stéphane
Group Art Unit	
Examiner Name	
Attorney Docket Number	

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I am the:

Applicant/Inventor.
 Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name DELUY, Nicolas

Signature

Date 10/04/03

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if necessary.

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number

Filing Date

First Named Inventor

SANSCHACRIN, Stéphane

Group Art Unit

Examiner Name

Attorney Docket Number

I hereby appoint:

Practitioners at Customer Number

OR

Practitioner(s) named below:

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Firm or
Individual Name

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Address

City

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Country

Telephone

Fax

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

VIGNAL, Pierre

Signature

Date

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